

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | BA | 10385 | |
| O.I.P.E. CLASSIFIER | | 10 | 9-26-00 |
| FORMALITY REVIEW | BA | 10 900 | 10-19-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | |
| 1 | 11-13-00 |
| 2 | ✓ |
| 3 | ✓ |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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